

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

**For State and Local Candidates
For Single-Candidate Committees**

RECEIVED
OCT 10 2018
WILSON COUNTY
ELECTION COMMISSION
3/15

1. DATE OF REPORT 10/9/18		2.a. NAME OF CANDIDATE OR COMMITTEE Camille Burdine	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE Nov. 2018	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 107 Greenlawn Dr. Lebanon TN 37087 500-7250			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone			
5. OFFICE SOUGHT (include district number, if applicable) City 3		6. NAME OF POLITICAL TREASURER (may be candidate) Camille Burdine	
7. CATEGORY OR REPORT (check one)			
<input type="checkbox"/> FIRST QUARTER	<input type="checkbox"/> SECOND QUARTER	<input checked="" type="checkbox"/> THIRD QUARTER	<input type="checkbox"/> FOURTH QUARTER
<input type="checkbox"/> PRE-PRIMARY	<input type="checkbox"/> PRE-GENERAL	<input type="checkbox"/> MID-YEAR SUPPLEMENTAL	<input type="checkbox"/> YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING DATE OF REPORTING PERIOD	
9. (Check one)			
a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)			
b. <input checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.			
Camille Burdine signature of candidate		Camille Burdine signature of political treasurer	
10/9/18 date		10/9/18 date	
11. WITNESS SIGNATURE		11. WITNESS SIGNATURE	
[Signature] signature of witness		[Signature] signature of witness	
10-9-18 date		10-9-18 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	.....	\$	0
b. TOTAL RECEIPTS THIS PERIOD	.....	\$	7,290.45
c. TOTAL DISBURSEMENTS THIS PERIOD	.....	\$	5,782.11
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	.....	\$	1,508.34
e. TOTAL LOANS OUTSTANDING	.....	\$	0
f. TOTAL OBLIGATIONS OUTSTANDING	.....	\$	0



SUMMARY PAGE - CANDIDATE

WILSON COUNTY
ELECTION COMMISSION

13. NAME OF CANDIDATE OR COMMITTEE (In Full)

14. REPORT COVERING THE PERIOD

FROM 5/25/18 TO 9/30/18

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 390.⁰⁰

b. Itemized Contributions (over \$100 from each source this period) \$ 6,900.⁰⁰

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 7,290

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$.60

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 7,290.60

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

Creative Graphics \$ 61.46

Publix Food \$ 98.38

Parking Power of 10 Summit \$ 15.00

South Eastern Impressions Hats \$ 87.40

Postage \$ 20.⁰⁰

..... \$ _____

..... \$ _____

..... \$ _____

..... \$ _____

Total of Expenditures (\$100 or less each payee) \$ 282.23

b. Itemized Expenditures (Over \$100 each payee this period) \$ 5,499.88

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 5,782.11

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 5,782.11

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 0

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Camille Burdine		2. REPORT COVERING THE PERIOD FROM: 7/10/18 TO: 7/14/18	
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3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)	Amount 3,000.00
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4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)

First Name Camille	Middle Name Love	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution 3,000.00
Last Name/Organization Name Burdine			
Address 107 Greenlawn Drive			
City Lebanon	State TN	Zip Code 37087	Aggregate This Election
Occupation Business Development			
Employer Peoples Home Equity			
Date of Contribution 6/25/18 500. 6/11/18 500. 6/25/18 1,000.			

First Name Oreg	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution 1,000.00
Last Name/Organization Name Dugdale			
Address 1113 N. Cumberland St			
City Lebanon	State TN	Zip Code 37087	Aggregate This Election
Occupation Realestate			
Employer Dugdale Properties			
Date of Contribution 7/14/18			

First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Aggregate This Election
Occupation			
Employer			
Date of Contribution			

First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Aggregate This Election
Occupation			
Employer			
Date of Contribution			

First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Aggregate This Election
Occupation			
Employer			
Date of Contribution			

First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Aggregate This Election
Occupation			
Employer			
Date of Contribution			

5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)	
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OCT 09 2018

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

ELECTION COMMISSION
MASON COUNTY

1. NAME OF CANDIDATE OR COMMITTEE Camille Burdine		2. REPORT COVERING THE PERIOD	
		FROM 9/6/18	TO 9/30/18
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount 400.00	

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)

First Name Ed	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Stanford		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	100.00
Address 118 Greenlawn Dr.		<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon	State TN	Zip Code 37087	Date of Contribution 9/6/18
Occupation			Aggregate This Election
Employer			

First Name Joe	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Adams		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	100.00
Address 116 W. Main St.		<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon	State TN	Zip Code 37087	Date of Contribution 9/6/18
Occupation			Aggregate This Election
Employer			

First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Hendrick Counseling		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	100.00
Address 440 Park Ave		<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon	State TN	Zip Code 37087	Date of Contribution 9/6/18
Occupation			Aggregate This Election
Employer			

First Name Gordon	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Miller		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	100.00
Address 2005 Butler Cove		<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon	State TN	Zip Code 37087	Date of Contribution 9/6/18
Occupation			Aggregate This Election
Employer			

5. TOTAL ITEMIZED CONTRIBUTIONS	
(Carry forward to item 3. of next page if additional pages of this form are used.) (if this is the last page of contributions, this amount must be shown in item 15b. of summary.)	

OCT 09 2018

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

ELECTION COMMISSION

WELLS COUNTY

1. NAME OF CANDIDATE OR COMMITTEE Camille Burdine			2. REPORT COVERING THE PERIOD 9/6/18 TO: 9/30/18	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name Camille	Middle Name Love	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution 3,300
Last Name/Organization Name Burdine				
Address 107 Greenlawn Dr				
City Lebanon	State TN	Zip Code 37087	Date of Contribution 9/10/18	Aggregate This Election
Occupation				
Employer				
First Name Brian	Middle Name -	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution 100.00
Last Name/Organization Name Fuller				
Address 407 Cambridge				
City Lebanon	State TN	Zip Code 37087	Date of Contribution 9/6/18	Aggregate This Election
Occupation				
Employer				
First Name Steve	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution 100.00
Last Name/Organization Name Jones				
Address 115 N. Castle Heights Ave				
City Lebanon	State TN	Zip Code 37087	Date of Contribution 9/6/18	Aggregate This Election
Occupation				
Employer				
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution
Last Name/Organization Name				
Address				
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
5. TOTAL ITEMIZED CONTRIBUTIONS				
(Carry forward to item 3. of next page if additional pages of this form are used.)				
(If this is the last page of contributions, this amount must be shown in item 15b of summary.)				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Cynthia Burdine</i>		2. REPORT COVERING THE PERIOD FROM <i>5/25/18</i> TO <i>7/1/18</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Signs Now</i>		<i>Signage & Car Wrap</i>	<i>1305.21</i>
Address <i>218 S Maple</i>			
City <i>Lebanon</i>	State <i>TN</i>			Zip Code 37087
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Lebanon Chamber of Commerce</i>		<i>Brick</i>	<i>250.00</i>
Address <i>149 Public Square</i>			
City <i>Lebanon</i>	State <i>TN</i>			Zip Code 37087
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Wix Website</i>		<i>Website Purchase</i>	<i>116.85</i>
Address <i>235 West 23rd Street</i>			
City <i>New York</i>	State <i>NY</i>			Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State			Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State			Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State			Zip Code
5. TOTAL ITEMIZED EXPENDITURES			
(Carry forward to item 3. of next page if additional pages of this form are used.)			
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE
WV SO
 ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE Camille Bourdine			2. REPORT COVERING THE PERIOD FROM: 7/1/18 TO: 9/30/18	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 3,477.82
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name South East Impressions		T-Shirts for Campaign		755.19
Address 114 Leeville Pike				
City Lebanon	State TN				Zip Code 37087
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Signs Now		Signage		1,553.23
Address 218 S Maple St				
City Lebanon	State TN				Zip Code 37087
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Sams Club		Food for Fundraising Party		389.40
Address 301 Indian Lake Blvd				
City Hendersonville	State TN				Zip Code 37075
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Captain Notepad		Pads & Pens to Give away		399.30
Address 14 Inverness Dr.				
City Englewood	State CO				Zip Code 80112
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name South East Impressions		Hats		131.10
Address 114 Leeville Pike				
City Lebanon	State TN				Zip Code 37087
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Lynnwood Road Band		Band for Fundraising Party		250.00
Address 301 Pennsylvania Ave.				
City Lebanon	State TN				Zip Code 37087
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary)				

OCT 09 2018

ITEMIZED STATEMENT OF EXPENDITURES

WILSON COUNTY CANDIDATE ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE <i>Camille Burdine</i>	2. REPORT COVERING THE PERIOD	
	FROM <i>7/1/18</i>	TO <i>9/30/18</i>

3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)	Amount <i>350.00</i>
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4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)

First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>EMTAR</i>		<i>Table for Realtor fundraising for Casa</i>	<i>350.00</i>
Address			
City <i>Lebanon</i>	State <i>TN</i>			Zip Code 37087

First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State	Zip Code	

First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State	Zip Code	

First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State	Zip Code	

First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State	Zip Code	

First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State	Zip Code	

5. TOTAL ITEMIZED EXPENDITURES	
(Carry forward to item 3. of next page if additional pages of this form are used.)	
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)	

